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APPLICANTS

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** CONTINUING DATA ****

No

** FOREIGN APPLICATIONS ****

No

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after		
Verifier and Acknowledged	<i>Mason</i> <i>My</i> Examiner's Signature Initials		
STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
ISRAEL	DRAWING 7	21	2

ADDRESS

27130
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TITLE

System, apparatus and method for wide format printing

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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